



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re the Application of:
Walther B. PEDERSEN, et al.
Serial No.: 09/926,756
Filed: May 3, 2002

Group Art Unit: 3738
Examiner: A.J. Stewart

For: PROSTHETIC DEVICE

TRANSMITTAL

Mail Stop Amendment

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an **Amendment Under Rule 1.111 and Petition for Extension of Time** for filing in the above-captioned patent application.

The fee has been calculated as shown below:

	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra		Small Entity Rate Additional Fee	(or)	Other Than Small Entity Rate Additional Fee
Total Claims	52	- 63	=	0	x 25 = \$	x 50 = \$	
Ind. Claims	05	- 04	=	1	x100 = \$100.00	x200 = \$	
[] Multiple Dependent Claims					+180 = \$	+360 = \$	
				Total	\$100.00	Total	\$

XXXX A credit card payment form in the amount of **\$160.00** is attached for:

Independent claims fee in excess of 3;
Petition for Extension of Time (1x)

XXXX If a Petition for Extension of Time is necessary and the Petition and/or the credit card payment form is not enclosed, this will act as the Petition and applicant herewith petitions the Commissioner to extend the time for response and charge any fees necessary under 37 CFR 1.17 (a)(1)-(5) to Deposit Account No. 06-1358. The Commissioner is also authorized to charge payment of any other additional fees associated with this communication or credit any overpayment to Deposit Account No. 06-1358. A duplicate copy of this sheet is attached.

Respectfully submitted,

JACOBSON HOLMAN PLLC

By: 

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Date: June 30, 2006
HBJ:JGC:gm
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